

DEPARTMENT OF HEALTH SERVICES  
COUNTY OF LOS ANGELES

SUBJECT: **PATIENT REFUSAL OF TREATMENT  
OR TRANSPORT**

(EMT/PARAMEDIC/MICN)  
REFERENCE NO. 834

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**PURPOSE:** To provide procedures for EMS personnel to follow when patients, parents, or legal representatives refuse medical treatment and/or ambulance transportation.

**AUTHORITY:** California Health and Safety Code, Division 2.5, Sections 1797.220, 1798,  
(a).California Welfare and Institution Code, Sections 305, 625, 5150, and 5170.  
Title 22, California Code of Regulations, Section 100169.

**DEFINITIONS:**

**Adult:** A person at least eighteen years of age.

**Minor:** A person less than eighteen years of age.

**Minor Not Requiring Parental Consent is a person who:**

- Is 12 years or older and in need of care for a reportable medical condition or substance abuse
- Is pregnant and requires care related to the pregnancy
- Is in immediate danger of suspected physical or sexual abuse
- Is an emancipated minor

**Emancipated Minor:** A person under the age of 18 years is an emancipated minor if any of the following conditions are met:

- Married or previously married
- On active military duty
- The person has received a declaration of emancipation pursuant to Section 7122 of the California Family Code, which includes all of the following: at least fourteen (14) years of age, living separate and apart from their parents and managing their own financial affairs (may be verified by DMV Identification Card)

**Decision-Making Capacity:** The ability to understand the nature and consequences of proposed health care. This includes understanding the significant risks and benefits, and having the ability to make and communicate a decision regarding the proposed health care. A person has decision-making capacity if they are able to:

- Understand the need for treatment, the implications of receiving and of not receiving treatment, and alternative forms of treatment that are available, and
- Relate the above information to their personal values, and then make and convey a decision.

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EFFECTIVE DATE: 11-08-93  
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SUPERSEDES: 03-01-14

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APPROVED: \_\_\_\_\_

Director, EMS Agency

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Medical Director, EMS Agency

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The lack of decision-making capacity may be:

- Temporarily lost (e.g., due to unconsciousness, influence of mind altering substances, mental illness or cognitive impairment)
- Permanently lost (e.g., due to irreversible coma, persistent vegetative state, untreatable brain injury or dementia)
- Never existed (i.e., due to profound neurodevelopmental disorder, those who are deemed by the Court as incompetent or a person under conservatorship)

**Emergency:** A condition or situation in which an individual has an immediate need for medical attention, whether actual or perceived.

**Implied Consent:** This is a type of consent involving the presumption that an unconscious or a person lacking decision-making capacity would consent to lifesaving care. This shall include minors with an emergency medical condition and a parent or legal representative is not available.

**"Patient Not Requiring Transport" or "Release at Scene":** A patient who, after a complete assessment by EMS personnel, does not meet any criteria listed in Ref. No. 808 and does not appear to require immediate treatment and/or transportation.

**Refusing Care Against Medical Advice (AMA):** A patient or a legal representative of a patient who has the capacity to refuses treatment and/or transport. This includes patients who meet any criteria listed in Ref. No. 808, or appear to require immediate treatment and/or transportation.

**5150 Hold:** A patient who is held against their will for evaluation under the authority of Welfare and Institutions Code, Section 5150, because the patient is a danger to themselves, a danger to others, and/or gravely disabled (i.e., unable to care for self). This is a written order by law enforcement officer, County mental health worker, or a health worker certified by the County to place an individual on a 5150 hold.

**PRINCIPLES:**

1. An adult or emancipated minor who has decision-making capacity has the right to determine the course of their medical care including the refusal of care. These patients must be advised of the risks and consequences resulting from refusal of medical care.
2. A patient less than eighteen (18) years of age, with the exception of minors not requiring parental consent, must have a parent or legal representative to refuse evaluation, treatment, and/or transport for an emergency condition.
3. A patient determined by EMS personnel or the base hospital to lack decision-making capacity may not refuse care AMA or be released at scene. Mental illness, drugs, alcohol, or physical/mental impairment may impair a patient's decision-making capacity but are not sufficient to eliminate decision-making capacity. Patients who have attempted suicide, verbalized suicidal intent, or if other factors lead EMS personnel to suspect suicidal intent, should be regarded as lacking the decision-making capacity. Diagnosed mental illness alone or a patient's report of ingesting drugs/alcohol does not justify a determination of lack of decision-making capacity. Capacity determinations are specific only to the particular decision that needs to be made.



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4. At no time are EMS personnel to put themselves in danger by attempting to treat and/or transport a patient who refuses care.

**POLICY:**

- I. Adult With Decision-Making Capacity or Minor (Not Requiring Parental Consent)
- A. EMS personnel shall advise the patient of the risks and consequences which may result from refusal of treatment and/or transport. The patient should be advised to seek immediate medical care.
  - B. If the patient's condition meets any criteria for base hospital contact and a BLS unit is alone on scene, an ALS unit should be requested.
  - C. When base hospital contact is made, contact should be made prior to the patient leaving the scene. Paramedics shall advise the base hospital of all the circumstances including care, transportation, reasons for refusal, and the patient's plans for follow-up care.
  - D. Paramedics shall have the patient or their legal representative, as appropriate, sign the release (AMA) section of the EMS Report Form. The signature shall be witnessed, preferably by a family member.
  - E. A patient's refusal to sign the AMA section should be documented on the EMS Report Form.
- II. Individual Lacking Decision-Making Capacity or a Minor (Requiring Parental Consent):
- A. The patient should be transported to an appropriate receiving facility under implied consent. A 5150 hold is not required.
  - B. If EMS personnel or the base hospital determines it is necessary to transport the patient against their will and the patient resists, or the EMS personnel believe the patient will resist, assistance from law enforcement should be requested in transporting the patient. Law enforcement may consider the placement of a 5150 hold on the patient but this is not required for transport.
  - C. Law enforcement should be involved whenever EMS personnel believe a parent or other legal representative of the patient is acting unreasonably in refusing immediate care and/or transport.
- III. Patients Released at Scene:
- A. EMS personnel shall advise the patient to seek follow-up treatment or immediate medical care, including re-contacting 9-1-1 if they develop symptoms at a later time. The advice given should be documented on the EMS Report Form.
  - B. EMS personnel should not require patients released at scene to sign the release (AMA) section of the EMS Report Form, as this implies that the patient is at significant risk by not utilizing the EMS system for treatment and/or transportation.
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IV. Documentation:

An EMS Report Form must be completed for each incident of patient refusal of emergency medical evaluation, care and/or transportation. EMS personnel shall ensure that documentation includes, at a minimum, the following:

- A. Patient history and assessment
- B. Description of the patient which clearly indicates their decision-making capacity
- C. What the patient is refusing (i.e., medical care, transport)
- D. Why the patient is refusing care
- E. Risk and consequences of refusing care
- F. Statement that the patient understands the risks and consequences of refusing care
- G. Signature of patient or legal representative refusing care
- H. Patient's plan for follow-up care

CROSS REFERENCE:

Prehospital Care Manual:

Ref. No. 808, **Base Hospital Contact and Transport Criteria**

Ref. No. 832, **Treatment/Transport of Minors**